VENDOR APPLICATION

First Name		
Last Name		
Physical Address		
Mailing Address (if different than	physical address)	
Primary Phone Number		
Email Address		
Website.Address		
Please list specifically what items y		ket:
Do you act as a wholesaler or as a indicate name of farmer or origin o	broker for a specific farmo of produce.	er? If so, please
have read the Square Market rule to them.	es, understand them, and	agree to adhere
Signature	— Date	4 2 43